Case 1:17-cv-06898-RBK-KMW Document 12
U.S. Department of Justice
United States Marshals Service

FROCESS RECEIPT AND REPURN 109

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF ANDREW DAVIS##0088762±163851+GG						COURT CASE NUMBER 1:17-cv-06898-RBK			
DEFENDANT						TYPE OF PROCESS			
Sergeant J.	KUHLEN,	Badge	# S104	<u> </u>		Summons/Complaint			
SERVE NAME OF IND	DIVIDUAL, CO	MPANY, COR	PORATION,	ETC., TO SERVE O	R DESCRIPT	ION OF PROPERTY T	O SEIZE OR CONDEMN		
Sergeant	: <u>J. Ku</u> k	ılen, B	adge#S	104-Southw	roods S	tate Priso	n		
ADDRESS (St.	reet or RFD, Ap	artment No., C	City, State and	ZIP Code) geton, N.J			•, •		
SEND NOTICE OF SERVICE COPY	TO REQUEST	ER AT NAME	AND ADDR	ESS BELOW:	T., .				
ANDREW DAVIS# 1038672-163851-G E.J.S.P.?Lock Bag R 1100 Woodbridge Road Rahway, New Jersey, 07065						of process to be ith this Form - 285	·		
						of parties to be this case			
					Check fo	r service	THE STORY		
SPECIAL INSTRUCTIONS OR OTH Telephone Numbers, and Estimated Ti			WILL ASSIS	I IN EXPEDITING	SERVICE (<u>In</u>	clude Business and Alte	ernate Addresses All		
Sergeant Southwoods 215 S. Bus Bridgeton (856) 459	s State clington	Prison n Road					TRICT COURT CEIVED		
Signature of Attorney or other Origina	tor requesting s	ervice on beha	If of:	♥ PLAINTIFF	N	ONE NUMBER	DATE		
SPACE BELOW FOR	USE OF	U.S. MA	RSHAI	ONLY — D	Q NOT	WRITE BELO	OW THIS LINE		
I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)		District of Origin No. ASO	District: to Serve	Signature of Auth	٠	Deputy or Clerk	Date 9/21/18		
I hereby certify and return that I What on the individual, company, corporation	ive personally s	erved, \square have	legal evidenc	e of service, have	executed as s	hown in "Remarks", the			
☐ I hereby certify and return that I ar	n unable to loca	te the individu	al, company,	corporation, etc., nam	ed above (See	remarks below)			
Name and title of individual served (if	not shown abov	ve) 4 .		* 35%		cretion then usual place of	f suitable age and dis- residing in the defendant's of abode.		
Address (complete only if different tha	n shown above)	7 - 1		*	. ``	Date of Service	Time (am)		
•						Signature of U.S.	Masshal or Deputy		
Service Fee Total Mileage Ch		rding Fee Tot	tal Charges	Advance Deposits	Amount ow		Amount of Refund		
65, 755,20	· ·	7	70,20			20,20			

Case 1:17-cv-06898-RBK-KMW
U.S. Department of Justice
United States Marshals Service

Document 12

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshalo on the reverse of this form.

PLAINTIFF ANDREW DAVIS#1038762-163851-G	COURT CASE NUMBER 1:17-cv-06898-RBK			
DEFENDANT Sergeant R. DUNNS, Badge#S054	TYPE OF PROCESS Summons/Complaint			
SERVE NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR	DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN			
Sergeant R. DUNNS, Radge#S054- Southw	voods State Prison			
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) AT 215 S. Bridgeton Road, Bridgeton, N.J	J. 08 30 2			
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:	Number of process to be			
ANDREW DAVIS# 1038762-163851-G	served with this Form - 285			
E.J.S.P./LOCK BAG R 1100 Woodbridge Road	Number of parties to be served in this case			
Rahway, N.J. 07065	Check for service on U.S.A.			
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SI Telephone Numbers, and Estimated Times Available For Service):	ERVICE (Include Business and Alternate Addresses, All			
Sergeant R. DUNNS, Badge#S054 Southwoods State Prison 215 S. Burlington Road Bridgeton, N.J. 08302 (856) 459-7000; Fax (856) 785-459-7140	S. DISTRICT COURTERS RECEIVED OCT 12 P 1:			
Signature of Attorney or other Originator requesting service on behalf of:	TELEPHONE NUMBER DATE TO THE TOTAL TOT			
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO	O NOT WRITE BELOW THIS LINE			
number of process indicated. of Origin to Serve	orized USMS Deputy or Clerk Date			
(Sign only first USM 285 if more than one USM 285 is submitted) No. ASa No 2nickal	el Kozysa 9/21/18			
I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have e on the individual, company, corporation, etc., at the address shown above or on the individual, company,	executed as shown in "Remarks", the process described corporation, etc., shown at the address inserted below.			
☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., name	ed above (See remarks below)			
Name and title of individual served (if not shown above)	A person of suitable age and discretion then residing in the defendant's usual place of abode.			
Address (complete only if different than shown above)	Date of Service Time am			
	Signature of 0.8. Marshal or Deputy			
Service Fee Total Mileage Charges (including endeavors) (120, 120, 120, 120, 120, 120, 120, 120,	Amount owed to U.S. Marshal or Amount of Refund			

Case 1:17-cv-06898-RBK-KMW Document 12 U.S. Department of Justice United States Marshals Service

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address) Sergeant: S. HUNTER, Badge#S003 Southwoods State Prison 215 S. Burlington Road Bridgeton, N.J. 08302 856-459=7000; Fax 856-785-459-7140 Signature of Attorney or other Originator requesting service on behalf of: SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW TO I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted) Total Process No. — Signature of Authorized USMS Deputy or Clerk No. — Service, have executed as shown in "Remarks", the process on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted. I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below) Name and title of individual served (if not shown above) I have I was a prison of suitable cretion then residing in usual place of abode.	nt
SERVE Sergeant: S. HUNTER, Badge#S003 Summons/Complain SERVE NAME OF INDIVIDUAL, COMPANY, CORPORATION, FIC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE Sergeant: S. HUNTER, Badge#S003-Southwoods State Prison ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 215 S. Bridgeton Road-XEMEKE Bridgeton, N.J. 08302 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: ANDREW DAVIS#1038762-163851-G E.J.S.P./LOCK BAG R 1100 Woodbridge Road Rahway, N.J. 07065 SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address Southwoods State Prison 215 S. Burlington Road Bridgeton, N.J. 08302 856-459=7000; Fax 856-785-459-7140 Signature of Attorney or other Originator requesting service on behalf of: ARCHARD AND SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: Numbers, and Estimated Times Available For Service; Sergeant: S. HUNTER, Badge#S003 Southwoods State Prison 215 S. Burlington Road Bridgeton, N.J. 08302 856-459=7000; Fax 856-785-459-7140 Signature of Attorney or other Originator requesting service on behalf of: ARCHARD AND SERVICE (Include Business and Alternate Address Service): Signature of Authorized USMS Deputy or Clerk of Origin (Sign only first USM 285 if more than one USM 283 is submitted) Total Process of Origin Company, corporation, etc., allow at the address inserted than one USM 283 is submitted) Thereby certify and return that I A have personally served, have legal evidence of service, have executed as shown in "Remarks", the process of the individual, company, corporation, etc., allows at the address inserted than one USM 283 is submitted) Aperson of suitable evidence of service, have executed as shown in "Remarks", the process of the individual, company, corporation, etc., allows at the address inserted than one of shoots.	OR CONDEMN
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OF SERVE SERGENT: S. HUNTER, Badge#S003-Southwoods State Prison ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 215 S. Bridgeton Road-XMXK Bridgeton, N.J. 08302 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: ANDREW DAVIS#1038762-163851-G E.J.S.P./LOCK BAG R 1100 Woodbridge Road Rahway, N.J. 07065 SPECIAL INSTRUCTIONS OR OTHER RNFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address) Sergeant: S. HUNTER, Badge#S003 Southwoods State Prison 215 S. Burlington Road Bridgeton, N.J. 08302 856-459=7000; Fax 856-785-459-7140 Signature of Attorney or other Originator requesting service on behalf of: **EXPLAINTIFF** DEFENDANT** DEFENDANT** DEFENDANT** Signature of Authorized USMS Deputy or Clerk with another of process indicated. (Sign only first USM 285 is authilited) Total Process Indicated. (Sign only first USM 285 is indicated. (Sign only first USM 285 is indicated. (Sign only first USM 285 is more than one USM 285 is authilited) I hereby certify and return that I A have personally served, have legal evidence of service, have executed as shown in "Remarks", the process on the individual, company, corporation, etc., shown at the address inserted usual place of abode.	OR CONDEMN
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Rahway, N.J. 07065 Check for service on U.S.A. Check for service on U.S.	
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Sergeant: S. HUNTER, Badge#S003 Southwoods State Prison 215 S. Burlington Road Bridgeton, N.J. 08302 856-459=7000; Fax 856-785-459-7140 Sergeant: S. HUNTER, Badge#S003 Southwoods State Prison 215 S. Burlington Road Bridgeton, N.J. 08302 856-459=7000; Fax 856-785-459-7140 Segment of Attorney or other Originator requesting service on behalf of: Sepace Below For Use of U.S. Marshal Only — Do Not Write Below To Serve (If not shown above) I hereby certify and return that I am unable to locate the individual, company, corporation, etc., shown at the address inserted (If not shown above) I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below) A person of suitable cretion then residing in usual place of abode.	
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Bridgeton, N.J. 08302 856-459=7000; Fax 856-785-459-7140 Ignature of Attorney or other Originator requesting service on behalf of:	
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW To acknowledge receipt for the total amber of process indicated. Sign only first USM 285 if more and one USM 285 is submitted) Total Process District of Origin to Serve No. — Signature of Authorized USMS Deputy or Clerk and one USM 285 is submitted) Thereby certify and return that I is have personally served, — have legal evidence of service, — have executed as shown in "Remarks", the process of the individual, company, corporation, etc., shown at the address inserted. I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below) A person of suitable cretion then residing in usual place of abode.	
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of Origin to Serve No. As is submitted. No. As No.	Date
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10/12/11/10	below.
Signature of U.S. Marshal of	age and disthe defendant
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(including endeavors)	age and disthe defendant
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Case 1:17-cv-06898-RBK-KMW Document 12
U.S. Department of Justice
United States Marshals Service

Filed 10/12/18, Page 4 of 14 Page ID: 112
PROCESS RECEIPT AND RETURN
See Instructions for "Service of Process by the U.S. Marsh on the reverse of this form. See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF ANDREW DAVIS	x#1038762 - 16	3851-G			COURT CASE NUMBER 1:17-cv-06898-RBK			
DEFENDANT	7/1030702-10	3071 6			TYPE OF PROCESS			
SCO: M. GARC					Summons/Complaint			
	GARCIA, Bad					SEIZE OR CONDEMN		
	reet or RFD, Apartment N			<u> </u>	ace illison	·		
	Bridgeton Ro			. 083	02			
SEND NOTICE OF SERVICE COPY								
			er of process to be with this Form - 285					
	S#1038762-1	Nh-						
E.J.S.PL0 1100 Woodbi					Number of parties to be served in this case			
Rahway, N.	07065			Clarita.		+		
				on U.S.	111.			
SPECIAL INSTRUCTIONS OR OT			T IN EXPEDITING	SERVICE (rnate Addresses, All		
Telephone Numbers, and Estimated Ti	mes Available For Service	e): ·	•	•. •	, · · · · ·	Fold		
SCO. M. GARO								
Southwoods S 215 S. Burl:	state Prison ington Road.	ı Bridget	on. N.J. C	8302	4.0	D Big		
(856) 459-70	000; Fax (85	6) 785-4	59-7140		•			
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Signature of Attorney or other Origina	ntor requesting service on	behalf of:		TELEP	HONE NUMBER	DATE		
			▼ PLAINTIFF □ DEFENDAN	n n /	A			
SPACE BELOW FOR	TICE OF ILC	MADCHAI	CONTSV D	O NOT	WOTTE DEL	W THIS I INE		
I acknowledge receipt for the total	Total Process District	District.			IS Deputy or Clerk	Date		
number of process indicated.	of Origin					Date		
(Sign only first USM 285 if more than one USM 285 is submitted)	/ No. #5	No	Micha	el K	Zys	9/21/18		
I hereby certify and return that I	ave personally served,	have legal eviden	ce of service, have	executed as	shown in "Remarks", the	process described		
on the individual, company, corporation	on, etc., at the address sho	wn above or on th	e individual, company	, corporation	n, etc., shown at the addre	ss inserted below.		
I hereby certify and return that I a	m unable to locate the ind	ividual, company,	corporation, etc., nam	ed above (S	ee remarks below)	3;		
Name and title of individual served (ij	f not shown above)		· Sees 1			suitable age and dis- residing in the defendant's		
CINAG CINIER	I HIR				usual place of	of abode.		
Address (complete only if different the	ın shown above)			22	Date of Service	Time (am)		
-					10/12/18	W pm		
					Signature of U.S.	Marshal or Deputy		
		Tmu 1 Ct	Admir Division	4		A SP C 1		
Service Fee Total Mileage Ch	narges Forwarding Fee	Total Charges	Advance Deposits	Amount of	owed to U.S. Marshal or	Amount of Refund		
65. 1553.20		1/10,00		4/	W. C			
REMARKS:								

U.S. Department of Justice United States Marshals Service Filed 10/12/18 Page 5 of 14 PageID: 11
PROCESS RECEIPT AND RETURN

PLAINTIFF CONTRACTOR ACCOUNTS OF THE PLAINTIFF	COURT CASE NUMBER 17-06898-RBK-KMW			
ANDREW DAVIS#1038672-163851-G DEFENDANT		TYPE OF PROCESS	SK-KHW	
		Summons/Complaint		
SERVE NAME OF INDIVIDUAL, COMPANY, CORPORATION, E	TC TO SERVE OR DESC			
SCOR S. LOPEZ, Bade#00582-Se				
ADDRESS (Street or RFD, Apartment No., City, State and Z			-	
215 Pridecton Road-Bridgeton		2		
All				
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRE	N	imber of process to be		
ANDREW DAVIS#1038762-163851-G	· I ser	rved with this Form - 285		
E.J.S.P./LOCK BAG R	Nu	imber of parties to be		
1100 Woodbridge Road		rved in this case	, <u>e</u>	
Rahway, N.J. 07065	<u> </u>		-1:-	
· ·		neck for service	202	
			4 3 50	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST Telephone Numbers, and Estimated Times Available For Service):	IN EXPEDITING SERVIO	,	nate Addresses, All	
Fold			TO Fold	
SCO: S. LOPEZ, Badge#00582 Southwoods State Prison				
215 S. Burlington Road		•	- 824 - 24	
Bridgeton, N.J. 08302				
(856)459-7000; Fax (856)785-459-	7140			
(8)0)4)9-7000; Fax (0)07705 455				
Signature of Attorney or other Originator requesting service on behalf of:	Y PLAINTIFF TE	ELEPHONE NUMBER	DATE	
	DEFENDANT	N/A		
SPACE BELOW FOR USE OF U.S. MARSHAL	ONLY — DO N	OT WRITE BELO	W THIS LINE	
I acknowledge receipt for the total Total Process District District	Signature of Authorized	USMS Deputy or Clerk	Date	
number of process indicated. (Sign only first USM 285 if more	2010/00/	Land	2/11	
than one USM 285 is submitted) No. ASO No	michael	to segget		
I hereby certify and return that I Dhave personally served, have legal evidence	of service, have execut	ed as shown in "Remarks", the	process described	
on the individual, company, corporation, etc., at the address shown above or on the	individual, company, corpo	ration, etc., shown at the addres	s inserted below.	
☐ I hereby certify and return that I am unable to locate the individual, company, co	orporation, etc., named above	ve (See remarks below)		
Name and title of individual served (if not shown above)			suitable age and dis-	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		cretion then rusual place of	esiding in the defendant's	
Char Civis He		Date of Service		
Address (complete only if different than shown above)	· · · · · · · · · · · · · · · · · · ·	Date of Service	Time	
		10/12/18	//00 pm	
		Signature of U.S.	Marshal or Deputy	
		4.11	MD .	
Service Fee Total Mileage Charges Forwarding Fee Total Charges	Advance Deposits Amo	ount owed to S.S. Marshal or	Amount of Refund	
b/ (idelyding endeavors) - 17020		612020		
051 35,20 1/20		110,		
REMARKS:				

Case 1:17-cv-06898-RBK-KMW Document 12 PROCESS RECEIPT AND RETURN 114 U.S. Department of Justice United States Marshals Service Document 12 PROCESS RECEIPT AND RETURN See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF	COURT CASE NUMBER
ANDREW_DAVIS#1038762-163851-G	17-06898-RBK-KMW
DEFENDANT	TYPE OF PROCESS
SCO: J. ELBEUF, Badge#00203	Summons/Complaint
SERVE NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC.	., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
SCO: J. ELBEUF. Bade#00203-Sc	outhwoods State Prison
ADDRESS (Street or RFD, Apartment No., City, State and ZIP)	
AT 215 S. Bridgeton Road, Bridge	eton, N.J. 08302
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS	BELOW:
	Number of process to be served with this Form - 285
ANDREW DAVIS#1038762-163851-G	
E.J.S.P./LOCK BAG R	Number of parties to be
1100 Woodbridge Road	served in this case
Rahway, N.J. 07065	Check for service
	on U.S.A.
PECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN	a
elephone Numbers, and Estimated Times Available For Service):	
old	C RESTOR
SCO: J. ELBEUF, Bade#00203 Southwoods State Prison	7 9 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
215 S. Burlington Road	THE C
Bridgeton, N.J. 08302	T OFF
(856)459-7000; Fax (856)785-459-71	140 · · · · · · · · · · · · · · · · · · ·
(850)459-7000; Fax (850)785-459-75	
Signature of Attorney or other Originator requesting service on behalf of:	PLAINTIFF TELEPHONE NUMBER DATE
4	□ DEFENDANT N/A
SPACE BELOW FOR USE OF U.S. MARSHAL O	NI V = DO NOT WRITE RELOW THIS I INE
	Signature of Authorized USMS Deputy or Clerk Date
acknowledge receipt for the total umber of process indicated. Total Process District District to Serve	
Sign only first USM 285 if more	michael Kryna 9/21/18
hereby certify and return that \(\bigcap \) have personally served, \(\subseteq \) have legal evidence of n, the individual, company, corporation, etc., at the address shown above or on the ind	service, have executed as shown in "Remarks", the process described
iguie individual, company, corporation, etc., at the address shown above of on the ind	vidual, company, corporation, etc., shown at the address inserted below.
I hereby-certify and return that I am unable to locate the individual, company, corporate	oration, etc., named above (See remarks below)
Jame and title of individual served (if not shown above)	A person of suitable age and dis-
(was him	cretion then residing in the defendant's usual place of abode.
ddress (complete only if different than shown above)	Date of Service Time
, , , , , , , , , , , , , , , , , , ,	10/0/11/1/10/
	/ <i>V</i> ///////////////////////////////////
•	Signature of 18. Marshal or Deputy
Service Fee Total Mileage Charges Forwarding Fee Total Charges. Adv	vance Deposits Amount owed; to U.S. Marshal and Amount of Refund
(including endeavors)	80620
00, 100.	-100,
REMARKS:	

U.S. Department of Justice United States Marshals Service		S RECEIPT AND RET ns for "Service of Process by the of this form.				
PLAINTIFF ANDREW DAVIS#1038762-163851-G			COURT CASE NUMBER 17-06898-RBK-KMW			
DEFENDANT		TYPE OF PROCESS				
SCO: V. SRINELLI, Badge#00742 SERVE NAME OF INDIVIDUAL, COMPANY, CORPORAT	TON ETC TO SERVE OF	Summons/Comp				
SERVE NAME OF INDIVIDUAL, COMPANY, CORPORATE SCO. V. SPINELLI, Badge#			SEIZE OR CONDEMIN			
ADDRESS (Street or RFD, Apartment No., City, State						
AT 215 S. Bridgeton Road-Br	idgeton, N.J	. 08302	3 **			
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND A	Number of process to be served with this Form - 285	ISTRIC U.S.				
ANDREW DAVIS#1038762-163851 E.J.S.P./LOCK BAG R 1100 Woodbridge Road	Number of parties to be served in this case					
Rahway, N.J. 07065		Check for service on U.S.A.	COURT WJERS			
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL A Telephone Numbers, and Estimated Times Available For Service): Fold	ASSIST IN EXPEDITING	SERVICE (<u>Include Business and Alter</u>	nate Addresses, All Fold			
SCO. V. SPINELLI, Badge#00742 Southwoods State Prison 215 S. Burlington Road Bridgeton, N.J. 08302 (856)459-7000; Fax (856)785-	٠.					
Signature of Attorney or other Originator requesting service on behalf of:	X□ PLAINTIFF □ DEFENDAN		DATE			
SPACE BELOW FOR USE OF U.S. MARSH	IAL ONLY — D	O NOT WRITE BELO	W THIS LINE			
I acknowledge receipt for the total number of process indicated. Total Process District of Origin to Service of O	ct. Signature of Authore	norized USMS Deputy or Clerk	Date			
(Sign only first USM 285 if more than one USM 285 is submitted) No. #50 No	Micha	el Kozyna	9/1/18			
I hereby certify and return that I have personally served, \square have legal evon the individual, company, corporation, etc., at the address shown above or	vidence of service, \(\square\) have on the individual, company	executed as shown in "Remarks", the v, corporation, etc., shown at the address	process described s inserted below.			
☐ I hereby certify and return that I am unable to locate the individual, comp	pany, corporation, etc., nam	ned above (See remarks below)	v .			
Name and title of individual served (if not shown above)		A person of cretion then rusual place of	suitable age and dis- esiding in the defendant's abode.			
Address (complete only if different than shown above)	and the second	Date of Service	Time and			
		Signature of U.S.	Marshal or Deputy			
Service Fee Total Mileage Charges (ineluding endeavors) REMARKS: Total Mileage Charges Forwarding Fee Total Charges (ineluding endeavors)	ges Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund			

Ú.S. Department of Justice United States Marshals Service		RECEIPT AND RET for "Service of Process by the f this form.			
D. A. Derror					
PLAINTIFF		COURT CASE NUMBER			
ANDREW DAVIS#1038762-102851x@x	163851-G	17-06898-RBK	-KMW		
			. 1		
SCO: J. Hawk. Badge#00174 SERVE NAME OF INDIVIDUAL, COMPANY, CORPORATIO	N ETC. TO SERVE OR D	Summons/Comp			
SERVE		•	SEIZE OR CONDEMIN		
SCO: J. HAWK, Badge#00174 ADDRESS (Street or RFD, Apartment No., City, State of		State Prison			
AT 215 Bridgeton Road-Bridge	ton, N.J. 08	302			
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADI	DRESS BELOW:	Number of process to be served with this Form - 285]		
ANDREW DAVIS#1038762-163851-G		, , , , , , , , , , , , , , , , , , ,			
E.J.S.P./LOCK BAG R		Number of parties to be			
1100 Woodbridge Road		served in this case			
Rahway, N.J. 07065		Check for service on U.S.A.	als.		
		400	-nin		
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASS Telephone Numbers, and Estimated Times Available For Service): Fold	SIST IN EXPEDITING SE	RVICE (<u>Include Business and Altern</u>	ate Addresses, All		
SCO. J. HAWK, Badge#00174		. ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~) 學需管理		
Southwoods State Prison		. 7	1 850		
215 S. Burlington Road		-) HE		
Bridgeton, N.J. 08302		,			
856-459-7000; Fax 856-785-459-	7140	0	-		
Signature of Attorney or other Originator requesting service on behalf of:	T PLAINTIFF	TELEPHONE NUMBER	DATE		
	☐ DEFENDANT	N/A			
SPACE BELOW FOR USE OF U.S. MARSHA	L ONLY — DO	NOT WRITE BELO	W THIS LINE		
I acknowledge receipt for the total Total Process District District	Signature of Authori	ized USMS Deputy or Clerk	. Date		
number of process indicated	mi cha	0 V	alvella		
than one USM 285 is submitted) No. AS No	- Ma Cha	il rayys	9/21/18		
I hereby certify and return that I have personally served, \square have legal evide on the individual, company, corporation, etc., at the address shown above or on					
☐ I hereby certify and return that I am unable to locate the individual, company	y, corporation, etc., named	above (See remarks below),	· , was by		
Name and title of individual served (if not shown above)			uitable age and dis-		
Linder Linear HK	····	usual place of a			
Address (complete only if different than shown above)		Date of Service	Time and		
		1412/18	//00 pm		
		Signature of U.S. M.	arshal or Depaty		
		17-1	MUNI		
Service Fee Total Mileage Charges Forwarding Fee Total Charges	Advance Deposits A	Amount owed to V.S. Marshal or	Amount of Refund		
REMARKS:		()			
- Andrews and a second					

Case 1:17-cv-06898-RBK-KMW Document 12 Filed 10/12/18 Page 9 of 14 PageID: 117 PROCESS RECEIPT AND RETURN

U.S. Department of Justice United States Marshals Service

PLAINTIFF ANDREW DAVIS #1038762-163851G	COURT CASE NUMBER 1:17-cv-06898-RBK-KMW			
OFFICER LISA TORO #00891	TYPE OF PROCESS SUMMONS & COMPLAINT			
SERVE NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OF LISA TORO #00891 - SOUTHWOODS STATE	OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN			
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) BRIDGETON	, NEW JERSEY 08302			
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:	Number of process to be served with this Form - 285			
ANDREW DAVIS #1038762-163851G EAST JERSEY STATE PRISON LOCK BAG R	Number of parties to be served in this case			
RAHWAY, NEW JERSEY 07065	Check for service			
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING Telephone Numbers, and Estimated Times Available For Service): Fold	SERVICE (Include Business and Alternate Addresses, All			
OFFICER LISA TORO #00891 SOUTHWOODS STATE PRISON 215 S. BURLINGTON ROAD BRIDGETON, NEW JERSEY 08302	COURT P 1: 05			
856-459-7000; Fax 856-785-459-7140	,			
Signature of Attorney or other Originator requesting service on behalf of: \textstyle PLAINTIFI DEFENDA	1 37/2			
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY—I	OO NOT WRITE BELOW THIS LINE			
number of process indicated. of Origin to Serve	el Kozys 9 2/31/18			
I hereby certify and return that I have personally served, \square have legal evidence of service, \square have on the individual, company, corporation, etc., at the address shown above or on the individual, company	e executed as shown in "Remarks", the process described			
☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., nar	ned above (See remarks below)			
Name and title of individual served (if not shown above)	A person of suitable age and discretion then residing in the defendant's usual place of abode.			
Address (complete only if different than shown above)	Date of Service Time pm Signature of U.S. Marshal or Deputy			
Service Fee Total Mileage Charges (including endeavors) REMARKS: Total Mileage Charges Forwarding Fee Total Charges Advance Deposits	Amount of Refund Amount of Refund			

U.S. Department of Justice United States Marshals Service

Case 1:17-cv-06898-RBK-KMW Document 12 Filed 10/12/18 Page 10 of 14 PageID: 118 PROCESS RECEIPT AND RETURN

DI A D'ATTER										
PLAINTIFF 2	NDREW DA	VTS #10	38762-1	63851G			1:17-cv-0		PBK_K	MW
DEFENDANT	TIDICE II	<u> </u>		030310			TYPE OF PROCES		TIDK-I	
	OFFICER			,			SUMMONS &			
SERVE					ETC., TO SERVE OR I			TO SEI	ZE OR CO	NDEMN.
. > J					THWOODS STA	ATE P.	RISON			
	•		partment No., (-	ZIP Code) RIDGETON, N	प्रकार	EDCEV A93	12		
AT		•		<u> </u>	· · ·	AEM O	ERSEI UOS	12		
SEND NOTICE C	OF SERVICE COPY	TO REQUES	TER AT NAME	AND ADDR	ESS BELOW:		of process to be	٠.	<i>.</i>	
	• • • • • • • • • • • • • • • • • • • •			4.650.00		served v	vith this Form - 285			
	ANDREW DEAST JER	AVIS #1 SEY STA	038762- TE PRIS	-163851 SON	G		of parties to be		-	
	LOCK BAC	R	•			served i	n this case			
1	RAHWAY,	NEW JEF	RSEY 070	065		Check f	or service	(CLD	SISI	
						on U.S.	A.	\subseteq	25.0	
	UCTIONS OR OT rs, and Estimated T			WILL ASSIS	IN EXPEDITING SE	RVICE (II	nclude Business and	Alternate	the same of the sa	2
Fold			,	007764	- *-		•	1/2	A WEST	Fold
	OFFICER SOUTHWOO							U		:
	215 S. E		1					Borginsky	JERS	
	BRIDGETO				4			. 0		
	(856) 45	9-7000	FAX (356) 78	5-459-7140		•	വ		
					:					
Signature of Attor	ney or other Origin	ator requesting	service on beha	lf of:	X PLAINTIFF	TELEPI	HONE NUMBER	I	DATE	
					☐ DEFENDANT		N/A			
SPACE BI	ELOW FOR	R USE OI	TU.S. MA	RSHAL	ONLY — DO	NOT	WRITE BE	LOW	THIS	LINE
I acknowledge rec		Total Process	District	District			S Deputy or Clerk		Da	
number of process (Sign only first US			of Origin	to Serve		0 1	,			. 40
than one USM 285			No. 450	No	m'chae	/ /	zyrs		2	131/18
					e of service, have ex					
on the individual,	company, corporati	on, etc., at the a	address.shown a	bove or on the	individual, company, c	orporation	, etc., shown at the ac	ldress ins	erted below	V
☐ I hereby certify	y and return that I a	m unable to loc	ate the individu	al, company, o	corporation, etc., named	above (Se	e remarks below)			
Name and title of	individual served (f not shown abo	ove)				A person	of suita	ible age an	ıd dis-
1 was	1	iL	,				cretion the usual pla	en residi	ng in the de	fendant's
	only if different th	an shown above	e) ,·				Date of Service		_	an
							18hal		//00)
· war							19/9//		hal an De	pm
							Signature of I	- Wars	nai or Depu	шу
			<u>- T-</u>	1.01	···		1/)	f c		
Service Fee	Total Mileage C (including ende		arding Fee To	tal Charges	Advance Deposits	Amount or	wed to U.S. Marshal	ν	Amount of F	Refund
	55.2	10° -	— ')	120.20		O	120 20			
REMARKS:	J.,		<i>_</i>							

U.S. Department of Justice United States Marshals Service

PLAINTIFF	AND	REW DAY	VIS #1	038762-1	63851G		COURT CASE NU		RBK-KMW
DEFENDANT	OFF	CER DA	ANIEL	WEST #00	898	·. ,	TYPE OF PROCES		AINT
SERVE					ETC., TO SERVE OR			Y TO SEIZE	E OR CONDEMN
AT \	,		-	o., City, State and I	ZIP Code) DGETON, NE	W JER	SEY 08302		
SEND NOTICE O	OF SERVICE COPY	TO REQUES	TER AT NA	ME AND ADDRI	ESS BELOW:		of process to be with this Form - 285		
	EAST LOCK	JERSEY BAG R	STATE	8762-163 PRISON	851G		of parties to be a this case		
	RAHWA 	Y, NEW	JERSE 	Y 07065		Check for on U.S.A	or service	7018	e e e e e e e e e e e e e e e e e e e
	EUCTIONS OR OT ers, and Estimated T				I IN EXPEDITING S	ERVICE (<u>In</u>	nclude Business and	; ;zp	daresses, All
	SOUTH 215 S	WOODS S	STATE INGTON	ROAD				2 P	LERK RIOT COU
		, ,		RSEY 083 x 856-78	5-459- 71 40			: 05	ST T
Signature of Attor	ney or other Origin	ator requesting	service on b	pehalf of:			IONE NUMBER N/A	DA	TE
SPACE BI	ELOW FOR	R USE O	F U.S. N	IARSHAL	ONLY — DO	O NOT	WRITE BE	LOW	THIS LINE
number of process		Total Process	District of Origin	District to Serve	Signature of Author	_		ņi si	Date
(Sign only first US than one USM 285	5 is submitted)	/	No.AS		mida		- O O		9/24/18
					e of service, have e individual, company,				
☐ I hereby certif	fy and return that I a	m unable to lo	cate the indi-	vidual, company, c	corporation, etc., name	d above (Se	e remarks below)		
Name and title of	individual served.(.1	ove)				cretion t usual pla	hen residing ace of abode	le age and dis- ; in the defendant's
Address (complete	e only if different th	an shown abov	e)			: ''	Date of Servi	ce Time	<u>am</u>
			- * ,				Signature of	LS. Marsha	pm l or Deputy
Service Fee	Total Mileage C (including ended	avors)	arding Fee	Total Charges /2020	Advance Deposits	Amount ov	wed to U.S. Marshal	or Am	nount of Refund

Case 1:17-cv-06898-RBK-KMW Document 12 U.S. Department of Justice United States Marshals Service

PLAINTIFF	COURT CASE NUMBER			
ANDREW_DAVIS#1038762-163851-G	17-06898-RBK-KMW			
DEFENDANT	TYPE OF PROCESS			
SCO: A DOOLEY, Badge#00726	Summons/Complaint			
SERVE NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OF	· · · · · · · · · · · · · · · · · · ·			
SCO: A. DOOLEY, Badge#00726-Southwo	ods State Prison			
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)				
AT 215 S. S. Bridgeton Road-Bridgeton,	N.J. 08302			
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:	Number of process to be			
	served with this Form - 285			
ANDREW DAVIS#1038762-163851-G	Tax and the second			
E.J.S.P./LOCK BAG R 1100 Woodbridge Road	Number of parties to be served in this case			
- Rahway, N.J. 22222 07065				
	Check for service			
	on U.S.A.			
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING S	SERVICE (Include Business and Alternate Addresses, All			
Telephone Numbers, and Estimated Times Available For Service): Fold	Fold			
SCO: A. DOOLEY, Badge#00726				
Southwoods State Prison	2 ENSUE 2			
215 S. Burlington Road	7 6 <u>5</u> 6			
Bridgeton, N.J. 08302 (856)459-7000; Fax (856)785-459-7140	mens O S			
(8)8)439-7000; Fax (0)07703 135 7170	0 7			
	<u> </u>			
Signature of Attorney or other Originator requesting service on behalf of:	TELEPHONE NUMBER DATE			
□ DEFENDAN	rt			
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — D	O NOT WRITE BELOW THIS LINE			
	orized USMS Deputy or Clerk Date			
number of process indicated. of Origin to Serve (Sign only first USM 285 if more	1 V			
than one USM 285 is submitted) No. A50 No 2016bb	al K-zupa 9/21/18			
I hereby certify and return that I have personally served, have legal evidence of service, have	executed as shown in "Remarks", the process described			
on the individual, company, corporation, etc., at the address shown above or on the individual, company	, corporation, etc., shown at the address inserted below.			
☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., name	ed above (See remarks below)			
Name and title of individual served (if not shown above)	A person of suitable age and dis-			
Linda Cases Ha	cretion then residing in the defendant's usual place of abode.			
Address (complete only if different than shown above)	Date of Service Time			
	18/2/14 1/17)			
	70/10/17 1700 pm			
	Signature of U.S. Marshal or Deputy			
Service Fee Total Mileage Charges Forwarding Fee Total Charges Advance Deposits	. Amount owed to U.S. Marshal or Amount of Refund			
(including endeavors)				
US/ 85, W / /LOt	10.0			
REMARKS:				

Case 1:17-cv-06898-RBK-KMW Document 12
U.S. Department of Justice
United States Marshals Service

Document 12

Filed 10/12/18 Page 13 of 14 Page D 121

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Mars on the reverse of this form. See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF ANDREW DAVIS	S# 1039	769-163	851-C			COURT CASE NUMBI	98-PBK
DEFENDANT				060		TYPE OF PROCESS	
Lieutenant,						Summons/Com	
						TION OF PROPERTY TO	
					Sout	hwoods State	Prison
	_		City, State and 2 l, Bride	e ton, N.J	. 083	02	
SEND NOTICE OF SERVICE COPY				SS BELOW:		r of process to be with this Form - 285	
ANDREW DAV E.J.S.PL 1100 Woodb	OCK BAG ridge R		Number of parties to be served in this case				
Rahway, N.	J. 0706 		_ ,	<u>.</u> _	Check for U.S.	for service A.	
SPECIAL INSTRUCTIONS OR OT				IN EXPEDITING	SERVICE (I		male Addresses, All
Telephone Numbers, and Estimated To		-		* 0 6 0		20	지분 요일이 1
Lieutenant, Southwoods			Badge#	F068		12	
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Bridgeton,			•			<u> </u>	E E
(856) 459-7	000; Fa	x (856)	785-45	9-7140		***	22
						<u>\$</u> 0	~<
Signature of Attorney or other Origina	ator requesting	service on beha	alf of:	¶ PLAINTIFF □ DEFENDAN	NT /	HONE NUMBER	DATE
SPACE BELOW FOR	USE OF	U.S. MA	ARSHAL	ONLY — D	O/NOT	WRITE BELC	W THIS LIN
I acknowledge receipt for the total number of process indicated.	Total Process	District of Origin	District to Serve	Signature of Auth	orized USM	S Deputy or Clerk	Date
(Sign only first USM 285 if more	' ,	No. A-50	No	micha	of K	nena	9/1/1
than one USM 285 is submitted)							1,547
I hereby certify and return that I I on the individual, company, corporation	ave personally and the a	ddress shown	e legal evidence above or on the	of service, ☐ have individual, company	executed as corporation	shown in "Remarks", the n, etc., shown at the addres	process described s inserted below.
☐ I hereby certify and return that I a	m unable to loc	ate the individ	ual, company, co	orporation, etc., nam	ed above (Se	ee remarks below) .	
Name and title of individual served (i)	f not shown abo	ve)				A person of cretion then rusual place of	suitable age and dis- esiding in the defendant f abode.
Address (complete only if different the	an shown above) ,	11 100		*	Date of Service	Time .
					•	16/14/12	_//W 1
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Service Fee Total Mileage Cl (including ended	ivors)	Tuning ree 110	10/20/20	-kuvance Deposits	Amount o	20.20	Amount of Refund
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MAY BE USED

Case 1:17-cv-06898-RBK-KMW Document 12 Filed 10/12/18 Page 14 of 14 PageID: 122

U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

PLAINTIFF							COURT CASE NUMB	ED		
AMDRE	U DAVIS	#10387	62-1638	51-6 6	-		1:17-cv-068		ζ	
DEFENDANT	M DUATO	1410301	1000.	 	· .		TYPE OF PROCESS			
	M. MACK	EPRANCE	, Badge	£005 74	•		Summons/Com	plain	t	
					ETC., TO SERVE OR	DESCRIPT	ION OF PROPERTY TO	SEIZE OR	CONDEMN	
			PRANG, 1							
			partment No., C			6				
AT :	215 S.	Bridge	ton Road	d, Brid	geton, N.J	. 083	02 :			
SEND NOTICE OF SE						T .	of process to be	Т.		
							served with this Form - 285			
ANDR:	EW DAVI	S#1038	6 72-16 38	85 1- G			in Committee and the Committee Commi	3:=		
E.J.S.PLOCK BAG R 1100 Woodbridge Road Rahway, N.J. 07065							Number of parties to be			
						served in this case				
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Signature of Attorney of	or other Origina	ator requesting	service on bena	lf of:	X PLAINTIFF		IONE NUMBER	DATE	*	
Signature of Attorney of	or other Origina	ator requesting	service on bena	lf of:	☐ PLAINTIFF☐ DEFENDANT	NT /		DATE	ss	
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